REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE State Form 4606 (R13/11-05) Indiana Flaction Commission (IC 3-9-5-14)

(CFA-4) FILED Summary Sheet

Indiana Election Commission (IC	(3.9.5.14)		FILE NUMBER
INSTRUCTIONS: Please type or print legib	y IN BLACK INK all information	InDGInZdr AM 8: 10	
assistance in completing this form, see inst	uctions on the reverse side.		TOTAL PAGES IN ENTIRE CFA-4 REPORT
IS THIS AN AMENDMENT?	☐ Yes 💢 No _{HAI}	MILTON COUNTY COURTS	

COMMITTEE INFORMATION							
1. Full Name of Committee (as on Statement of Organization) Check if this is a new name							
MIKE WAITE FOR MAYOR							
2. Acronym or Abbreviated Name (if arry)	1	mittee Telephone Number 4) 5-74-718	8				
4. Mailing Address (address where all campaign finance correspondence is received)		s is a new address					
1007 WENDOVER							
5 City State 7IP Code		Affiliation (if applicable)					
Westfield, IN 46074	上人	BERTARIAN					
CANDIDATE INFORMATION (For Candidate's C							
7. Full Name of Candidate (include any nickname)		Affiliation or If Independe	nt Candidate				
MICHAEL C WAITE		BERTARIAN					
9. Office Sought (Include district number, if any. Not required for exploratory committee.)		inly of Residence					
MAYOR	HA	MILTON	N CANDIDATE ONLY				
TYPE OF REPORT			N CANDIDATES ONLY				
11. Check one: Pre-Primary Pre-Election Annual Nomination Other		Check one:	vention				
Final/Disbands Committee (lines 18, 19, and 20 must be "0") Utgoing Treasurer (within 10 days amend Statement of December 19, 19, and 20 must be "0")	or Organization	/					
12. Reporting Period: From: 4-9-// Through: 10-/4-//		COLUMN A This Period	COLUMN B Year to Date				
From: 4-4-// Through: 10-14-// 13. Cash on hand and investments at the beginning of this reporting period.		0					
14. Cash on hand and investments January 1, current year.			O				
CONTRIBUTIONS AND RECEIPTS							
(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)							
15a. Itemized (uso Schedule A)		4150000	\$ 1500.00				
15b. Uniternized		0					
15c. Add lines 15a and 15b in both columns SUB	TOTAL	\$ 1500,00	\$1500.00				
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B	TOTAL	\$ 1500.00	1500.00				
EXPENDITURES							
(Note: These amounts include in-kind expenditures and loan repayments.)							
17a. Itemized (use Schedule B) (Public Quastion: use Schedule C)		0	<u>(</u>)				
17b. Uniternized		641,38	697,58				
17c. Add lines 17a and 17b in both columns SUI	BTOTAL	697.58	697,58				
18. Cash on hand and investments at close of this reporting period (subtract 17c from 16 in both columns)	TOTAL	803,42	802.42				
19. Debts OWED BY the committee (use Schedule D)		O TAME P					
20. Debts OWED TO the committee (use Schedule E)		O 5 B					
RIFICATION			FOR OFFICE USE ONLY				
ST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE							
Title Date 10-20 15 }							
graduating .							
//o-7·0- 利 ***							
for sale or used for any commercial purpose	e. (IC 3-9-4-5	A person who knowingly	0				
person who fails to file a complete or accurate report as required by the Indiana Campaign Finance Law commits a Class B misdomeanor, (IC 3-14-1-14) and may be subject to civil penalties. (IC 3-9-4-16, IC 3-9-4-17, IC 3-9-4-18)							



REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

(CFA-4 SCHEDULE C) ITEMIZED EXPENDITURES For Public Questions

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For	assistance in
completing this schedule, see instructions on the reverse side. All cumulative expenses or transfers-out	regardless of
amount paid to political committees supporting or opposing a public question, MUST be itemized on this sol	redule.

FILE	NUM	BER		
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		PUBLIC OUESTIO	NINEODMATION			
PUBLIC QUESTION INFORMATION Enter Text of Public Question						
Type of Que Position;	estion: Statewide Supported Oppor	Local sed				
(street, no	NAME AND MAILING ADDRESS umber, city, state, ZIP code)	RECIPIENT'S OCCUPATION	TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE
7	Alders Printing 19 5, St Francis 11 Chita Kg 11 Chita	frinter	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	279.00	229.00	6-13.11
Wie	A Idam Printing 19 S. St Francis Lita, KS 67211	Printer	Direct In-Kind Payment of Dabt Returned Contribution Other Purpose:	233.63	233,43	9/21/11
	OVERNIUMT PriNS 2929 MAGNZIUE SUILLE, Ky 40211	Printer	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	34,95	34.95	8-17-11
474	Design Eleneus woudevel wostfield, IN 4w74	WEB DESIGN	Direct In-Kind Payment of Debt Returned Contribution Other Purposa:	200 00	20000	7-15-11
Code			Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Code		40	Direct In Kind Payment of Dobt Returned Contribution Other Purpose.			
	TOTAL OF ALL PAG	SUBTOTAL THIS PACES OF SCHEDULE C ON THE		\$ 697,5¥		
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State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

(CFA-4 SCHEDULE A-2) CONTRIBUTIONS BY CORPORATIONS

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY CORPORATIONS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from corporations OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

	FILE NUMBER	
Page	of	

MESTAPOLE		CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
Direct In-Kind (describe)	1,	MIKE WAITE 1007 WENDOUBE	Direct in-Kind (describe) Other Receipts: Interest Loan	\$1500.00	\$1500.00	6-1-11 MIRE WAIE
Direct In-Kind (describe)	Ž.		Direct in-Kind (describe) Other Receipts: Interest Loan			
Direct In-Kind (describe) Other Receipts: Interest Loan Misc. (specify) 5. Contributions: Direct In-Kind (describe) Other Recaipts: Interest Loan Interest Loan Misc. (specify) SUBTOTAL THIS PAGE OF SCHEDULE A \$ /500.000	3.		Direct In-Kind (describe) Other Receipts. Interest Loan			
Direct In-Kind (describe) Other Receipts: Interest Loan Misc. (specify) SUBTOTAL THIS PAGE OF SCHEDULE A \$ /500.00	4.		Direct In-Kind (describe) Other Receipts: Interest Loan			
SUBTOTAL THIS PAGE OF SCHEDULE A \$ 1500.00	5.		Direct In-Kind (describe) Other Receipts: Interest Loan			
TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY (Enter total on ITEM 15a of the Summary Sheet) \$ /500.00		TOTAL OF ALL PAGES OF SCHEDULE	A ON THE LAST PAGE ONLY	\$ 1500.00		